

# TRANSINDIA CALIBRATION SERVICES P LTD

763/19, KTC NAGAR,

KULASEKARAPATTI, TIRUNELVELI

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## INSTALLATION / SERVICE REPORT

|   |   |   |                 |
|---|---|---|-----------------|
| HOSPITAL NAME : PRIMARY HEALTH CENTRE, VADAPONPARAI, KALLAKURICHI DT, TN. |   | DATE :<br>14-10-2022  | JOB NO :<br>011 |
| ADDRESS & PHONE NO :<br>VADAPONPARAI,<br>KALLAKURICHI DT, TN.             |   | SERVICE ENGINEER NAME :<br>MOORTHY                                  |                 |
| CONTACT PERSON NAME &<br>CONTACT NO :                                     |   |   |                 |
| EQUIPMENT LOCATION :<br>PHC   | NAME OF EQUIPMENT :<br>Microscope                       | EQUIPMENT MODEL /<br>S.No: V12102 200<br>171102189                  |                 |
| SERVICE TYPE  | INSTALLATION / PREVENTIVE MAINTENANCE / BREAK DOWN CALL |   |                 |
| WARRANTY STATUS   | WARRANTY / OUT OF WARRANTY / CMC / AMC / MMC            |   |                 |
| PROBLEM REPORTED :<br>Amc   |   |   |                 |
| PROBLEM DIAGNOSED :<br>Pm Due   |   |   |                 |
| ACTION TAKEN :<br>pm done & checked                                       |   |   |                 |
| REMARKS :   |   | JOB COMPLETED   |                 |
|   |   | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |                 |

### PARTS REPLACEMENT DETAILS:

| S.No | PART NAME | QUANTITY | OLD PART NO. | NEW PART NO |
|------|-----------|----------|--------------|-------------|
|      |           |          |              |             |
|      |           |          |              |             |
|      |           |          |              |             |
|      |           |          |              |             |
|      |           |          |              |             |

CLINT REMARKS & SIGN WITH SEAL

ENGINEER'S SIGNATURE

